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DIVISION OF PROFESSIONAL REGULATION

ADVANCED PRACTICE COMMITTEE Minutes (Approved November 4, 2013)

The Advanced Practice Committee held a meeting on September 30, 2013 at 6:00 p.m., Conference Room A, Cannon Building, in Dover.

PRESENT: Cindy Cunningham, Megan Williams, Sandy Elliott, Delphos Price, Robert McKennett, Cindy Drew, JoAnn Baker, Allen Prettyman (telephonic)

ABSENT: Jean Gallagher, Candace Sandal, Leslie Verucci, Ron Castaldo

GUESTS: None

PRESIDING: Delphos Price

STAFF: Pamela Zickafoose, Executive Director, Delaware Board of Nursing

CALL TO ORDER: Mr. Price called the meeting to order at 6:19 p.m.

REVIEW OF MINUTES: Minutes from August 26, 2013 were reviewed. Ms. Elliott made a motion to accept the minutes as written, seconded by Ms. Drew. By unanimous vote, the motion carried.

ADDITIONS to the AGENDA: Mr. Price requested to amend the agenda to add "3.3 Midwives and 3.4 DNA/BON Position Paper" under New Business and 5.1 "Collaborative Agreement" under 5.0 Other Business before the Committee. Ms. Drew made a motion to approve the amended agenda, seconded by Ms. Baker. By unanimous vote the motion carried.

NEW BUSINESS:

Meeting with Brian Posey

Ms. Williams reported she saw Mr. Posey informally at a meeting and told him this committee is still working on educating stakeholders with grassroots efforts and we hope to put a bill forward next session. Ms. Williams will check with Mr. Posey to determine when he is available to attend this meeting.

Newsletter, 4th Edition

Mr. Price thanked Dr. Prettyman for preparing the newsletter and commented that revisions require a lot of dedication and hard work. Members of the committee confirmed receipt of the newsletter via email and they all commented how nice it was. They all joined Mr. Price in telling Dr. Prettyman how much they appreciate his work on these newsletters.

Midwives

Ms. Elliott stated she attended a meeting last week at Providence Creek in Clayton. Representatives Barbieri and Baumbach attended the meeting. Dr. Rattay chaired the meeting and Dr. Paul (CCHS) and Dr. Fan (ACOG) attended along with about 50 home birth mothers and families. Ms. Elliott provided a chart to APN committee members describing the three types of midwives (see attached). She explained that the majority of midwives are certified nurse midwives (CNM) but there are approximately 200 “certified midwives (CM)” in the U.S. who come from a program in New York. These CMs must have a bachelor’s degree in any area to enter the school and they participate in a 3 year program that focuses on maternity. They take the same boards as CNMs and they can practice in DE. The third type is the certified professional midwife (CPM) and they are the lay midwives; there is one licensed in DE and she has been practicing here for over 29 years. Lay midwives learn by apprenticing and completing 10 out-of-hospital births. Several lay midwives were disciplined this past year for practicing medicine without a license and HB 194 was enacted to criminalize this practice. The issue they are experiencing is they can’t get licensed because they do not have a collaborative agreement. The lay midwives are requesting removal of the collaborative agreement and they have a strong lobbyist along with the home birth mothers who have gone to the legislators to influence them to eliminate their requirement for a collaborative agreement. In addition, they are talking about a Board of Midwifery.

Ms. Drew commented the name “certified professional midwife” was very confusing to the public by having the term “professional” in the name when they are actually lay midwives. Ms. Elliott also reported she Googled “midwives” online and found a school located in Lewes, DE. Ms. Baker commented this is the same issue that was raised several years ago and she shared that information with the Division. Concerns were expressed about lay midwives giving Pitocin and delivering babies illegally. Ms. Elliott stated she was concerned about the patients who were not getting care at all. Committee members concluded there is a clear distinction because CNMs have master’s level education and national certification. This is what we should focus on as well as educating stakeholders about the different types of midwives. In addition the Consensus Model is a national model to gain consensus and make licensure more uniform in the U.S.

DNA/BON Position Paper

Ms. Williams reported she attended the DHCC meeting and the Medical Society of Delaware distributed their position statement on “Choose Health Delaware” in response to the CMMI grant for healthcare system redesign. She read some excerpts from their position statement including “...patient centered and physician led health care team will be the optimal means by which Delawareans will receive their health care.” She also read “It would be more prudent to: Maintain the current requirement of a collaborative agreement between advance practice nurses and physicians to ensure quality, public safety and cost effectiveness” yet there is no evidence to support this statement. The DNA and BON prepared a joint position statement in response to the MSD position supporting the CMMI grant and stating the collaborative agreement is a barrier to practice. It was felt the MSD took advantage of the neutral CMMI platform to advance their agenda regarding advanced practice nurses in Delaware. Instead, APNs should be a large part of the solution as indicated in the grant proposal. Copies of the DNA/BON position paper were distributed at the town hall meetings in Wilmington and Georgetown and additional copies will be supplied for the next DHCC meeting.

UNFINISHED BUSINESS:

Consensus Model Education- Meetings with Stakeholders Updates

Mr. McKennett reported he spoke with Paul Lakeman, Vice President of Government Relations at Bayhealth Medical Center who attends the DHA meetings and he was quite knowledgeable regarding the APRN Consensus Model and practice. However, Mr. Lakeman questioned whether nurses would "open their own practices" and Mr. McKennett discussed this with him at great length. This is a misconception in the medical community that needs clarification. APNs already have the ability to open their own practice in DE. Mr. Lakeman offered to schedule a meeting for the two of them to meet with the DHA Executive Board to further discuss these issues. Mr. McKennett also stated there is a new position at BHMC, the Director of Clinical Integration, who will be recommending improvements in their system to implement the ACA and accountable care organization. Mr. Price commented that the Geisinger Model is being implemented in several upstate hospitals which may decrease physician salaries but increase their vacation time benefit. Ms. Cunningham questioned about where mental health fits into all this and Ms. Williams commented that falls more under the patient centered medical home along with telehealth.

Ms. Verucci sent an email stating she and Dr. Prettyman were meeting with Dr. Kuhn from the Academy of Medicine next week. She also spoke with Rita Langraf who is willing to meet with us and suggested we also include Jill Rogers and Dr. Fan. Ms. Baker offered to contact Dr. Rattay to schedule a meeting with her as Dr. Zickafoose reported she had not heard back from the email previously sent.

Insurance Commission

Mr. Castaldo sent an email stating he had not heard from the DE Department of Insurance nor Gene Reed and Paul Reynolds whom he tried to contact several times. He questioned whether we should contact Karen Weldin-Stewart and said he would contact Senator Hall-Long for input.

Legislative Outreach Report-Meetings with Legislators Updates

Mr. Price stated he and Mr. Castaldo plan to meet with Senator Patricia Blevins who covers his district. No one else held meetings this month.

Statute

No report. On hold for now.

OTHER BUSINESS (for discussion only):

Collaborative Agreement Discussion-

Committee members reviewed documents that were presented to the MSD primary care doctors by a psychiatrist in Dover who is really supportive of collaborative agreements. He has developed his own model for collaboration and is sharing it with other physicians. These documents were shared with this committee to make them aware of this situation. One committee member was invited to the MSD meeting and was uninvited. The documents state this is his model which is not patented and no research or evidence based practice supports this model. Many APNs feel the requirement to have a collaborative agreement and the additional requirements in this model are a restriction of practice the FTC has clearly addressed in the past. Members concluded it is good to be informed. Members also questioned whether a psychiatric mental health CNS or NP must have a psychiatrist as a collaborator. Members agreed this was not the case as the rules are currently written.

PUBLIC COMMENT: None

NEXT MEETING – Mr. Price stated he will need to change the date of the next meeting due to his work schedule. Ms. Williams will contact Mr. Posey and inquire when he is available to meet. Several dates in Oct/Nov were suggested for a meeting in Newark.

ADJOURNMENT – The meeting was adjourned at 7:50 p.m.

Respectfully Submitted,

A handwritten signature in black ink that reads "Pamela C. Zickafoose". The signature is written in a cursive, flowing style.

Pamela C. Zickafoose, EdD, MSN, RN, NE-BC, CNE
Executive Director, Delaware Board of Nursing